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| Nemocnice Třinec |

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| **Objednávka** |

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| **Odběratel** |

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| **Dodavatel** |

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| **Nemocnice Třinec, příspěvková organizace** |
| **Kaštanová 268, Dolní Líštná** |
| **Třinec 739 61**  |
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| **CSL BEHRING s.r.o.** |
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| **Příjemce** |

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| Nemocnice Třinec, p.o. |

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| **Určeno pro** |

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| Kód akce |

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| Datum dodání |

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| Způsob dopravy |

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| Datum vytvoření |

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| Způsob úhrady |

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| Vytvořil a zodpovídá |

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| Obchodní podmínky |

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| Splatnost faktury 30 dní od vystavení |

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| Vlastní spojení |

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| Ceny jsou uváděny |

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| Způsob objednání |

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| Závaznost cen |

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| Závazné |

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| **Předmět** |

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| Dodávka léků a ZM |

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|  | **Kód položky** | **Název zboží** | **Množství** |
|  | 47596 | BERIPLEX | 15,00 |
|  | 47153 | ALBUREX | 50,00 |

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| **Celkem Kč bez DPH** |

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| **Celkem Kč s DPH** |

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| *Razítko a podpis odběratele* |

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| *Razítko a podpis dodavatele* |

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| Dodavatel svým podpisem potvrzuje objednávku a souhlasí s obchodními podmínkami. |

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| **Poznámka** |

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| Příkazce operace: |

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| Správce rozpočtu: |

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